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PTO/SB/05 (11-00)  
Approved for use through 10/31/2002. OMB 0851-0032

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# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

1434-C

First Inventor

LEZDEY

Title

ANTI-MICROBIAL PAPER

Express Mail Label No.

ET 508091315 US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:

Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

- ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original and a duplicate for fee processing)
- ☒ Applicant claims small entity status.  
See 37 CFR 1.27.
- ☒ Specification [Total Pages 13]  
(preferred arrangement set forth below)
  - Descriptive title of the invention
  - Cross Reference to Related Applications
  - Statement Regarding Fed sponsored R & D
  - Reference to sequence listing, a table, or a computer program listing appendix
  - Background of the Invention
  - Brief Summary of the Invention
  - Brief Description of the Drawings (if filed)
  - Detailed Description
  - Claim(s)
  - Abstract of the Disclosure
- ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets ]
- ☐ Oath or Declaration [Total Pages 13]
  - ☒ Newly executed (original or copy)
  - ☐ Copy from a prior application (37 CFR 1.63 (d))  
(for continuation/divisional with Box 18 completed)
    - ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
- ☐ Application Data Sheet. See 37 CFR 1.76

- ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
- Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
  - ☐ Computer Readable Form (CRF)
  - Specification Sequence Listing on:
    - ☐ CD-ROM or CD-R (2 copies); or
    - ☐ paper
  - ☐ Statements verifying identity of above copies

## ACCOMPANYING APPLICATION PARTS

- ☐ Assignment Papers (cover sheet & document(s))
- ☐ 37 CFR 3.73(b) Statement of Power of Attorney (when there is an assignee)
- ☐ English Translation Document (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
- ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
- ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
- ☐ Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP)

of prior application No.: 09, 491,224

Prior application information:

Examiner

LEZDEY

Group Art Unit:

1616

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or ☒ Correspondence address below

Name: JOHN LEZDEY  
Address: 1409 A NORTH FT HARRISON  
City: CLEARWATER State: FLORIDA Zip Code: 33755  
Country: US Telephone: (727) 441-1880 Fax: 441-1882

Name (Print/Type): JOHN LEZDEY Registration No. (Attorney/Agent): 22735  
Signature: John Lezdey Date: 11/20/01

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<h2 style="margin: 0;">FEE TRANSMITTAL</h2> <p style="font-size: small; margin: 5px 0;">Note: Effective October 1, 1997. Patent fees are subject to annual revision.</p>	<p><b>Complete if Known</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td></td></tr> <tr><td>Filing Date</td><td></td></tr> <tr><td>First Named Inventor</td><td>LEZDEY</td></tr> <tr><td>Group Art Unit</td><td>1616</td></tr> <tr><td>Examiner Name</td><td>LEVY</td></tr> <tr><td>Attorney Docket Number</td><td>1434-C</td></tr> </table>	Application Number		Filing Date		First Named Inventor	LEZDEY	Group Art Unit	1616	Examiner Name	LEVY	Attorney Docket Number	1434-C
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METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)																																																																																																																								
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number: <u>John LEZDEY</u></p> <p>Deposit Account Name: _____</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17    <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:  <input checked="" type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>	<p><b>3. 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SUBMITTED BY		Complete (if applicable)	
Typed or Printed Name	John LEZDEY	Reg. Number	22735
Signature	John Lezdey	Deposit Account User ID	12-1217
	Date: 11/20/02		

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